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**MORRISON | FOERSTER**425 MARKET STREET  
SAN FRANCISCO  
CALIFORNIA 94105-2482

TELEPHONE: 415.268.7000

FACSIMILE: 415.268.7522

WWW.MOFO.COM

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MORRISON &amp; FOERSTER LLP

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<b>TO:</b>	<b>FACSIMILE:</b>
Central Fax US Patent and Trademark Office	Examiner B. Shen Fax: (571) 273-9040

**FROM:** MICHAEL R. WARD  
Reg. No. 38,651**DATE:** April 9, 2007

Number of pages with cover page:	<b>12</b>	Preparer of this slip has confirmed that facsimile number given is correct: <b>MRW1/8693/lxo3</b>
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**Comments:****Attorney Docket No: 416272003900**

**Re:** U.S. Patent Application Serial No. 10/519,121 Filed December 23, 2004  
**For:** METHODS FOR MEASURING RATES OF REVERSE CHOLESTEROL  
 TRANSPORT IN VIVO, AS AN INDEX OF ANTI-ATHEROGENESIS  
**By:** Marc K. HELLERSTEIN  
**Your Reference:** B02-077  
**EXAMINER:** B. Shen **ART UNIT:** 1655  
**Our Reference:** 41627-20039.00

**DOCUMENTS ATTACHED: SUPPL RESP TO OA OF 8/8/06**

- 1) Transmittal - 1 pg
- 2) Fee Transmittal - 2 pgs
- 3) Supplemental Response to OA of 8/8/06 - 8 pgs

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PAGE 1/11 \* RCVD AT 4/9/2007 6:27:41 PM [Eastern Daylight Time] \* SVR:USPTO-EFXXRF-5/17 \* DNIS:2739040 \* CSID:415 2687522 \* DURATION (mm:ss):02:12

CFC - R. 4/11/07

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PTO/SB/21 (09-04)


Approved for use through 07/31/2009, OMB 0651-0031

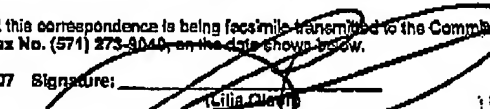
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/519,121
		Filing Date	September 15, 2003
		First Named Inventor	Marc K. HELLERSTEIN
		Art Unit	1655
		Examiner Name	B. Shen
Total Number of Pages in This Submission	11	Attorney Docket Number	416272003900

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form IN DUPL- 2 pgs  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply SUPPL RESP to OA of 8/8/06 - 8 pgs  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement (Supplemental, 3 pages)  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <div style="text-align: right;">FAX COVER SHEET - 1 pg</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)		
Signature			
Printed name	Michael R. Ward		
Date	April 9, 2007	Reg. No.	38,651

FACSIMILE TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the Commission for Patents, at facsimile no. Examiner Shen Fax No. (571) 273-9040, on the date shown below.	
Dated: April 9, 2007	Signature: 

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Effective on 12/09/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL  
for FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 25.00

Complete if Known	
Application Number	10/519,121
Filing Date	September 15, 2003
First Named Inventor	Marc K. HELLERSTEIN
Examiner Name	B. Shen
Art Unit	1655
Attorney Docket No.	416272003900

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	-0-
Design	200	100	100	50	130	65	-0-
Plant	200	100	300	150	160	80	-0-
Reissue	300	150	500	250	600	300	-0-
Provisional	200	100	0	0	0	0	-0-

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
21	-20 or HP	1	x 25 = \$25.00	0	0	0

HP + highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1	1-3 or HP	0	x 100 = 0

HP + highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Other: \$

SUBMITTED BY: MORRISON &amp; FOERSTER LLP

CUSTOMER NO. 20872

Signature		Registration No. (Attorney/Agent)	38,651	Telephone	415/268-6237
Name (Print/Type)	MICHAEL R. WARD	Date	April 9, 2007		

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04/12/2007 HKA/PAC/00000133-001952 10519121

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